

**Bridget Garrett**

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**From:** [REDACTED]@mayerandnewton.com]  
**Sent:** Wednesday, September 23, 2015 3:16 PM  
**To:** 'WS Massa, III'  
**Cc:** 'John Newton'  
**Subject:** Regions vs Driskill Ch 13 11-34102  
**Attachments:** PROOF OF INSURANCE.pdf; HOME OWNERS INSURANCE AMENDED DECLARATION PAGE.pdf

Dear Mr. Massa,

Attached please find proof of insurance for the above captioned case.

Bridget Garrett  
Chapter 13 Paralegal

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**From:** #Zkq#Qhz wq#p dbe=arkqghz wqC p d|hukggghz wq1frp %  
**Sent:** #Z hqghvgd|/hswip eh#56/5348#5=7<#SP  
**To:** #Z V# dvvd/II\*  
**Cc:** #gkdup rq|C p d|hukggghz wq1frp >#Subj|he#J duiner\*  
**Subject:** #Dhj hqv#v#G ubn#m

Are you doing the Agreed Order?

John P. Newton  
Mayer & Newton  
1111 Northshore Drive, Suite S-570  
Knoxville, TN 37919  
(865) 588-5111  
(865) 588-6143 (fax)  
johnnewton@mayerandnewton.com



**HOMEOWNERS POLICY  
NEW BUSINESS DECLARATIONS PAGE**

HO-8 (28)

**AMERICAN RELIABLE INSURANCE COMPANY**

**A Stock Insurance Company**  
8655 E Via De Ventura  
Scottsdale, AZ 85258-3321

**YOUR PRODUCER'S NAME AND ADDRESS IS:**

SHAFFER INSURANCE AGENCY, INC. 1314  
1100 MARION ST., SUITE 1  
KNOXVILLE, TN 37921

Phone #: 866-546-0761

**GENERAL AGENT**

**SOUTH & WESTERN GENERAL AGCY INC 9562**

**POLICY NUMBER: I28000900 01**

**POLICY TERM:** Effective Date: 01/15/13      Expiration Date: 01/15/14      Effective 12:01 a.m. Standard Time at Location of Property Described.

PROPERTY INFORMATION:	<u>DWELLING #</u>	<u>YEAR</u>	<u>CONSTRUCTION TYPE</u>
	1	1970	FRAME

DEDUCTIBLE(S) APPLIED TO LOCATION: \$1000 ALL OTHER PERILS/\$1000 HAIL/\$1000 WINDSTORM

**Named insured & Mailing Address:**

REGINA DRISKILL  
3123 JOYCE AVE  
KNOXVILLE TN 37921-6611

**Location of Insured Property.**

3123 JOYCE AVE  
KNOXVILLE, TN 37921-6611  
KNOX

[illegible]

ME-0000109

(Continued on Reverse Side)

INS

**ALL AMERICAN INSURANCE SERVICES**

**352-B LINDSAY ST.ALCOA TN 37701**

**865-681-3500**

**Dear Sirs,**

**My insured, Regina Driscoll, has had her home insured with Utica National since 01/15/2014 without a lapse. Enclosed is the dec page from last year and the current term. Please ,if you have any questions please call the number 865-681-3500 and ask for Dave Ryan agent.**

**Sincerely, David F. Ryan**



REPUBLIC FRANKLIN INSURANCE COMPANY  
180 GENESEE STREET  
NEW HARTFORD NY 13413-2299

NAMED INSURED AND MAILING ADDRESS

REGINA DRISKILL  
3123 JOYCE AVE  
KNOXVILLE TN 37921

Producer's Name and Address

ALL AMERICAN INS SVCS INC  
352 LINDSAY ST., STE. C

ALCOA, TN 37701

Producer's Code G0947 (865) 681-3500 AGT

POLICY NO. 4722274

HOMEOWNERS POLICY

\*\*\*\*\* AMENDED DECLARATIONS \*\*\*\*\*

FROM JAN 15, 2014 TO JAN 15, 2015

AMENDED ON JAN 15, 2014 #01

☐ 12:00 Noon

☒ 12:01 A.M. Std. Time at the Residence Premise

The RESIDENCE PREMISES covered by this policy is located at the above address unless otherwise stated. Additional policy provisions are on the reverse side.

Coverage is provided where a premium or limit of liability is shown for the coverage.

COVERAGES

SECTION I

LIMITS OF LIABILITY

A. DWELLING	\$	95,000
B. OTHER STRUCTURES		9,500
C. PERSONAL PROPERTY		66,500
D. LOSS OF USE		19,000
THE DEDUCTIBLE FOR ALL SECTION I PERILS IS		1,000
EXCEPT YOUR DED. FOR WINDSTORM OR HAIL IS 2% OF THE COV A LIMIT		1,900
TOTAL ADJUSTED BASE PREMIUM \$		670.00

SECTION II

E. PERSONAL LIABILITY	EACH OCCURRENCE-	100,000
F. MEDICAL PAYMENTS TO OTHERS	EACH PERSON -	1,000
TOTAL SECTION II PREMIUM	INCLUDED	

ENDORSEMENTS/CREDITS/FEES:

SPECIAL FORM			HO 00 03 (04/91)	INCLUDED
IDENTITY RECOVERY COVERAGE			8-E-3544 (05/08)	INCLUDED
WINDSTORM OR HAIL PERCENTAGE DEDUCTIBLE			HO 03 12 (10/93)	INCLUDED
VANISHING DEDUCTIBLE			8-E-3626 (04/07)	10.00
PERSONAL PROPERTY REPLACEMENT COST			HO 04 90 (04/91)	80.00
8-E-3653 (04/08)	8-L-1189 (04/91)	8-L-1646 (01/09)	8-L-2325 (04/11)	
8-L-936 (01/92)	HO 01 41 (11/99)	8-L-2003 (01/10)	8-E-3371 (05/02)	
HO 04 96 (04/91)	8-E-3662 (09/08)	8-L-1820 (04/02)	8-L-2115 (01/10)	

SUBTOTAL	\$	760.00
TOTAL POLICY PREMIUM	\$	760.00
NET PREMIUM CHANGE	\$	0.00

NAME CHANGE

RATING INFORMATION

NOTE: WINDSTORM OR HAIL PERCENTAGE DEDUCIBLE ENDORSEMENT HO 03 12 PREMIUM OF \$48.00- IS REFLECTED IN THE TOTAL ADJUSTED BASE PREMIUM LISTED ABOVE.

DWELLING IS OF FRAME CONSTRUCTION, TERRITORY IS 34, PROTECTION CODE IS 03, YEAR OF CONSTRUCTION IS 1970, OCCUPIED BY 1 FAMILY

THE DESCRIBED DWELLING IS PRIMARY

PREMIUM AMOUNT TO BE REFLECTED ON NEXT BILLING NOTICE

UNI-BILL NO. 101016243

FOR COMPANY USE ONLY: CONTINUED ON PAGE 2

AUTHORIZED REPRESENTATIVE

76000008 EH20831000 AGT

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88-0017 ED. 1-99



# UTICA NATIONAL INSURANCE GROUP

REPUBLIC FRANKLIN INSURANCE COMPANY  
180 GENESEE STREET  
NEW HARTFORD NY 13413-2299

## NAMED INSURED AND MAILING ADDRESS

REGINA DRISKILL  
3123 JOYCE AVE  
KNOXVILLE TN 37921

## Producer's Name and Address

ALL AMERICAN INS SVCS INC  
352 LINDSAY ST., STE. C

ALCOA, TN 37701

Producer's Code G0947 (865) 681-3500 AGT

POLICY NO. 4722274

HOMEOWNERS POLICY

\*\*\*\*\* RENEWAL CERTIFICATE \*\*\*\*\*

FROM JAN 15, 2015 TO JAN 15, 2016

☐ 12:00 Noon

☒ 12:01 A.M. Std. Time at the Residence Premise

The RESIDENCE PREMISES covered by this policy is located at the above address unless otherwise stated. Additional policy provisions are on the reverse side.

Coverage is provided where a premium or limit of liability is shown for the coverage.

COVERAGES	SECTION I	LIMITS OF LIABILITY
A. DWELLING		\$ 99,000
B. OTHER STRUCTURES		9,900
C. PERSONAL PROPERTY		69,300
D. LOSS OF USE		19,800
THE DEDUCTIBLE FOR ALL SECTION I PERILS IS		1,000
EXCEPT YOUR DED. FOR WINDSTORM OR HAIL IS 2% OF THE COV A LIMIT		1,980
	TOTAL ADJUSTED BASE PREMIUM \$	682.00
	SECTION II	
E. PERSONAL LIABILITY	EACH OCCURRENCE-	100,000
F. MEDICAL PAYMENTS TO OTHERS	EACH PERSON -	1,000
	TOTAL SECTION II PREMIUM INCLUDED	
ENDORSEMENTS/CREDITS/FEES:		
SPECIAL FORM	HO 00 03 (04/91)	INCLUDED
IDENTITY RECOVERY COVERAGE	8-E-3544 (05/08)	INCLUDED
WINDSTORM OR HAIL PERCENTAGE DEDUCTIBLE	HO 03 12 (10/93)	INCLUDED
VANISHING DEDUCTIBLE	8-E-3626 (04/07)	10.00
PERSONAL PROPERTY REPLACEMENT COST	HO 04 90 (04/91)	82.00
8-E-3653 (04/08) 8-L-999P (03/07) 8-E-3662 (09/08) 8-L-1820 (04/02)		
8-L-936 (01/92) 8-L-1189 (04/91) 8-L-1646 (01/09) 8-L-2325 (04/11)		
HO 04 96 (04/91) HO 01 41 (11/99) 8-L-2003 (01/10)		
	SUBTOTAL	\$ 774.00
	TOTAL POLICY PREMIUM	\$ 774.00

## RATING INFORMATION

NOTE: WINDSTORM OR HAIL PERCENTAGE DEDUCIBLE ENDORSEMENT HO 03 12 PREMIUM OF \$49.00- IS REFLECTED IN THE TOTAL ADJUSTED BASE PREMIUM LISTED ABOVE.

DWELLING IS OF FRAME CONSTRUCTION, TERRITORY IS 34, PROTECTION CODE IS 03, YEAR OF CONSTRUCTION IS 1998, OCCUPIED BY 1 FAMILY

THE DESCRIBED DWELLING IS PRIMARY

MORTGAGEE- REGIONS BANK DBA REGIONS MTG  
PO BOX 200401 ISACA FLORENCE SC 29502  
LOAN NUMBER:3006035640

PREMIUM AMOUNT TO BE REFLECTED ON NEXT BILLING NOTICE

UNI-BILL NO. 101016243

FOR COMPANY USE ONLY: CONTINUED ON PAGE 2

AUTHORIZED REPRESENTATIVE

*Lee Kane*

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